

**APPLICATION DATA SHEET****Application Information**

Application Type::	Regular
Subject Matter::	Utility
Title::	FLEXIBLE SUPPORT FOR A CHAIR BACKREST
Attorney Docket Number::	PAO-P0001
Suggested Drawing Figure::	1
Total Drawing Sheets::	3
Small Entity::	No

**Applicant Information**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	William
Middle Name::	B
Family Name::	RAFTERY
City of Residence::	Canton
State or Providence of Residence::	OH
Country of Residence::	US
Street of Mailing Address::	4864 Waltham Crossing NW
City of Mailing Address::	Canton
State or Providence of Mailing Address::	OH
Postal or Zip Code of Mailing Address::	44718

**Correspondence Information**

Correspondence Customer Number:: 35775  
Name:: Design IP  
Phone Number:: 215-988-9577  
Fax Number:: 215-243-8292  
E-Mail Address:: damonneagle@designip.com

**Representative Information**

Representative Customer Number::	35775
----------------------------------	-------

**Assignee Information**

Assignee Name:: Orleans Corporate Services, Inc.  
Street of Mailing Address:: 300 Delaware Avenue, Suit 12113  
City of Mailing Address:: Wilmington  
State or Providence of Mailing Address:: DE  
Country of Mailing Address:: US  
Postal or Zip Code of Mailing Address: 19801